

<b>UTILITY PATENT APPLICATION TRANSMITTAL</b> <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>		<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="width: 50%;">Attorney Docket No.</td><td>416272005602</td></tr><tr><td>First Inventor</td><td>Bob B. BUCHANAN</td></tr><tr><td>Title</td><td><b>STABILIZATION OF HYPOALLERGENIC, HYPERDIGESTIBLE PREVIOUSLY REDUCED PROTEINS</b></td></tr><tr><td>Express Mail Label No.</td><td>EL968416235US</td></tr></table>	Attorney Docket No.	416272005602	First Inventor	Bob B. BUCHANAN	Title	<b>STABILIZATION OF HYPOALLERGENIC, HYPERDIGESTIBLE PREVIOUSLY REDUCED PROTEINS</b>	Express Mail Label No.	EL968416235US			
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Oath or Declaration <span style="float: right;">[Total Sheets <b>6</b>]</span><ul style="list-style-type: none"><li>a. <input type="checkbox"/> Newly executed (original or copy)</li><li>b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <small>(for continuation/divisional with Box 18 completed)</small><ul style="list-style-type: none"><li>i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</small></li></ul></li></ul></p><p>6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76 (4 pages)</p></td><td style="width: 50%; vertical-align: top;"><p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)</p><p>8. 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<p>18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:</p> <p><input checked="" type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No.: <u>09/779,375</u></p> <p>Prior application information: Examiner <u>C. Kam</u> Art Unit: <u>1653</u></p> <p><b>For CONTINUATION OR DIVISIONAL APPS only:</b> The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts.</p>													
<b>19. CORRESPONDENCE ADDRESS</b>													
<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="width: 50%;"><input checked="" type="checkbox"/> Customer Number: <u>20872</u></td><td style="width: 50%;"><b>OR</b> <input type="checkbox"/> Correspondence address below</td></tr><tr><td colspan="2">Name</td></tr><tr><td colspan="2">Address</td></tr><tr><td>City</td><td>State</td><td>Zip Code</td></tr><tr><td>Country</td><td>Telephone</td><td>Fax</td></tr></table>		<input checked="" type="checkbox"/> Customer Number: <u>20872</u>	<b>OR</b> <input type="checkbox"/> Correspondence address below	Name		Address		City	State	Zip Code	Country	Telephone	Fax
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Dated: October 30, 2003

Signature: Valerie Cohen (Valerie Cohen)

17858 U.S. PTO  
10/698824  
103003

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FEE TRANSMITTAL for FY 2004				Complete if Known			
Effective 10/01/2003, Patent fees are subject to annual revision.				Application Number		Not Yet Assigned	
				Filing Date		Concurrently Herewith	
				First Named Inventor		Bob B. BUCHANAN	
				Examiner Name		Not Yet Assigned	
				Art Unit		Not Yet Assigned	
				Attorney Docket No.		416272005602	
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27							
TOTAL AMOUNT OF PAYMENT		(\$)		471.00			
METHOD OF PAYMENT (check all that apply)				FEE CALCULATION (continued)			
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input checked="" type="checkbox"/> Deposit Account: Deposit Account Number: <span style="border: 1px solid black; padding: 2px;">03-1952</span> Deposit Account Name: <span style="border: 1px solid black; padding: 2px;">Morrison &amp; Foerster LLP</span> The Director is authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input checked="" type="checkbox"/> Charge any additional fee(s) or any underpayment of fee(s) <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.				3. ADDITIONAL FEES			
FEE CALCULATION							
1. BASIC FILING FEE							
Large Entity	Small Entity			Large Entity	Small Entity		
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Code	Fee (\$)
Fee Description				Fee Description			
Fee Paid				Fee Paid			
1001	770	2001	385	Utility filing fee			
1002	340	2002	170	Design filing fee			
1003	530	2003	265	Plant filing fee			
1004	770	2004	385	Reissue filing fee			
1005	160	2005	80	Provisional filing fee			
SUBTOTAL (1)		(\$)		385.00			
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE							
Total Claims		19		Extra Claims		0	
Independent Claims		5		Fee from below		9	
Multiple Dependent				Fee Paid		0.00	
Large Entity		Small Entity		Fee Code		Fee (\$)	
Fee Code		Fee (\$)		Fee Description			
Fee Paid				Fee Paid			
1202	18	2202	9	Claims in excess of 20			
1201	86	2201	43	Independent claims in excess of 3			
1203	290	2203	145	Multiple dependent claim, if not paid			
1204	86	2204	43	** Reissue independent claims over original patent			
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent			
SUBTOTAL (2)		(\$)		86.00			
**or number previously paid, if greater; For Reissues, see above							
				Other fee (specify)			
				*Reduced by Basic Filing Fee Paid			
SUBTOTAL (3)		(\$)		0.00			
SUBMITTED BY				(Complete if applicable)			
Name (Print/Type)		Otis Littlefield		Registration No. (Attorney/Agent)		48,751	
Signature				Telephone		(415) 268-6846	
Date		October 30, 2003		Date		October 30, 2003	

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